

**POST PLACEMENT
REQUIREMENTS**

The following steps must be taken in a timely manner:

- The adoption worker must provide the foster care worker with the PCA-320, Order Placing Child After Consent, within 14 calendar days of issuance.
- The foster care worker must enter the adoptive home placement, close Medicaid (MA), and ensure the child welfare funding specialists (CWFS) has the legal orders to enter in the electronic case management record within 14 calendar days of receipt of the order and forward the case file to the adoption worker.
- The adoption worker, or foster care monitor for contracted adoption agency cases, must open the adoption case and MA and verify that it is transmitted to Bridges under the child's adoptive name. Do not open MA for children with SSI MA (types E or B) or children without citizenship status.
- During the time of adoption placement supervision, prior to the order confirming (finalizing) the adoption, the adoption worker must visit the adoptive family and child not less than monthly. The family must be advised of the results of the supervising agency's continuing assessment at the conclusion of each quarter.
- The DHS-613, Adoptive Placement Supervisory Report, must be used to report the child's and family's adjustment to the adoptive placement. This form must be used until finalization of the adoption. A copy of the DHS-613 must be given to the adoptive family each quarter.

**MONTHLY
CASEWORKER
VISITS**

Per federal child welfare policy, children who are in adoptive placement but not yet in a finalized adoption are considered to be in foster care until the PCA 321, Order of Adoption, is signed by the court. To meet the caseworker visit requirements, at least monthly visits by the adoption worker are required during adoption supervision for the purpose of assuring the safety and well-being of the child.

**Caseworker Visit
Requirements**

Each child and at least one adoptive parent must have a face-to-face adoption worker visit a minimum of once each calendar month. If there are two adoptive parents, the adoption worker must have a face-to-face visit with the child and the second adoptive parent, in the child's residence, at least once each quarter.

The adoption worker visit with the child and adoptive parent must take place in the child's residence at least every other month.

Each child visit must include a private meeting between the child and the adoption worker.

During the monthly visit, the areas to be discussed must include, but are not limited to, the following:

Child Visit

- Child's medical, dental, mental health, and physical appearance.
- Child's feelings/observations about the adoptive placement if age appropriate.
- Education.
- Sibling/relative visitation plans.
- Extracurricular/cultural activities/hobbies since last visit.
- Permanency plan.
- Any issues or concerns expressed by the child.

Adoptive Parent Visit

- Date of child's last physical and dental exam.
- Medication dosages and diagnoses for the child.
- Medical, dental, and mental health concerns, appointments, treatment, follow-up care and therapy updates.
- Child behaviors, concerns, and developmental milestones.

- Education, school status, performance, behaviors, and services provided.
- Adoptive parent tasks to meet the child's needs.
- Permanency plan.
- Any children's protective services (CPS) complaints made since the last visit.
- Status of any recommended training, if applicable.

General Information

- Type of visit.
- Visit location.
- Names of all persons present at the visit.
- The worker's observation of the child's bedroom.

**Additional
Caseworker Visits-
Recruited Families**

To ensure adequate supports for children placed in families with whom the child has not lived prior to adoptive placement or has been placed in the home for less than three months, the following minimum caseworker contact requirements must be met by the adoption worker:

- First month of adoptive placement:
 - One face-to-face supervision visit each week.
- Second and third months of adoptive placement:
 - One face-to-face supervision visit every two weeks.
 - By the end of the third month at least one collateral contact with a person familiar with the child who lives outside of the home (example teacher, doctor, therapist).
- Fourth and subsequent months of adoptive placement:
 - One face-to-face supervision visit each month.

**Additional
Caseworker
Responsibilities**

Once the PCA 320, Order Placing Child, is signed by the court, the adoption worker is the worker with primary responsibility to encourage and assist in facilitation of all the required medical and dental exams and to obtain the signed informed consent documentation for children taking psychotropic medication.

The assigned adoption worker must:

- Update the electronic case management system with the health screens as outlined in [FOM 801-1, Health Requirements](#).
- Send completed informed consent documentation to the Psychotropic Medication Oversight Unit at PsychotropicMedicationInformedConsent@michigan.gov.

See [FOM 801-1, Health Requirements](#), for required medical/dental exams information and [FOM 802-1, Psychotropic Medication](#), in Foster Care, for psychotropic medication information.

For additional assistance, contact the county health liaison officer (HLO).

**Documenting
Caseworker Visits**

The information gathered during the monthly caseworker visits and all caseworker contacts must be documented in the child's case record. The information must be included in the DHS-613 and the DHS-222, Adoption Closing Summary.

**Caseworker Visit
Tools**

Two caseworker visit tools are available to assist workers in gathering the above required information during monthly visits. The tools are:

- DHS-904, Foster Care/Adoption/Juvenile Justice Caseworker Visit Quick Reference Guide. This is a guide that contains the information that must be covered in a monthly visit but is not intended for recording notes.

- DHS-904A, Foster Care/Adoption/Juvenile Justice Caseworker Visit Tool. This form contains the same information as the DHS-904 but includes room to take notes during the visit.

The caseworker visit tools provide structure and reminders of required topics. The tools are not to be used as documentation in the case record. Information from visits must be summarized and documented quarterly using the DHS-613 and/or DHS-222.

Entry of Caseworker Visits in the Electronic Case Management Record

Social work contacts include phone contact, emails, and face-to-face caseworker visits with children, foster parents/relative caregivers and adoptive parents, and communications with other interested parties. All social work contacts must be entered into the electronic case management record.

Direct workers must enter all face-to-face contacts and collateral contacts, with children, foster parents/relative caregivers and adoptive parents into the electronic case management record within five business days of the contact. The contact must include the location of the face-to-face contact.

MEDICAID (MA) ADOPTION SUPERVISION - NOT ELIGIBLE FOR ASSISTANCE

Former permanent court wards and state (MCI) wards are eligible for MA during the period of adoption supervision prior to finalization (Legal Status Code 43, Court Ward-Supervised Adoption) even if they are not eligible for adoption assistance. When the adoption is finalized or if the adoption disrupts and the child returns to foster care, the MA for these children must be closed.

BENEFIT NOTICE

For children whose adoptions are finalized, the DHS-176, Benefit Notice, must be sent to the child or their family with the following statement: "We have not made a determination of your MA eligibility beyond the effective date shown above. You may be eligible for further assistance. You must complete and submit a

MDHHS-1171, Assistance Application, to determine your continued eligibility for MA.” File a copy of the DHS-176 in the child’s case record.

Assistance applications are available from the local Michigan Department of Health and Human Services (MDHHS) office or online at [MDHHS Doing Business](#). Select MDHHS-1171 from the related documents section at the end of the webpage.

ADOPTION TAXPAYER IDENTIFICATION NUMBER (ATIN)

Upon adoptive placement, pending finalization, the adoptive family must be referred to the Internal Revenue Service (IRS) to determine whether application should be made for an Adoption Taxpayer Identification Number (ATIN). The ATIN is a temporary identification number issued by the IRS when a Social Security Number (SSN) cannot be obtained for an adopted child. A new SSN for an adopted child is not applied for until the adoption is finalized.

An ATIN must be used in lieu of a SSN for a child placed in adoption (but not yet finalized) and claimed as a dependent when filing a federal income tax return. This matter is particularly relevant when an adoptive placement occurs late in a calendar year and finalization is not expected to occur until the following year. The adoptive family should be advised to obtain Form W-7A, Application for Taxpayer Identification Number for Pending U.S. Adoptions. This form may be obtained by contacting any of the following:

- IRS walk-in site (check the [IRS website \(www.irs.gov\)](http://www.irs.gov) for locations).
- [IRS forms and publications website](#).
- General IRS telephone number: 1-800-829-1040.

FINALIZATION PROCEDURES

Finalization of the adoption can be ordered by the court immediately after the adoptive placement order or following the completion of an adoption supervisory period. Finalization is contingent upon a positive recommendation by the placing agency.

If the court determines that adoption is in the best interest of the child, the court will issue the PCA 321. The court may issue the final order with or without a hearing. The adoption worker must attend any scheduled hearings. Both the family and the child placing agency receive a copy of the final order. For adoptions completed by contracted adoption agencies, a copy of the PCA 321 must be submitted to the MDHHS adoption monitor as soon as the order is received.

**Electronic Case
Management
Record Update**

The adoption worker or MDHHS adoption monitor must enter finalization information and caseworker visits in the electronic case management record, closing the adoption case as a finalized adoption. If MA (for a child without adoption assistance-related MA) was opened during the supervision period by a services worker, the services worker must close the MA case at finalization.

**Notice of Post
Adoption Services**

When the final PCA 321 is received, the child placing agency must inform the family in writing of post adoption services available to assist the family using the MDHHS-5912, Post Adoption Services in Michigan. When families request assistance, MDHHS must provide services or refer the family to appropriate community resources. The local MDHHS office must assist adoptive families seeking medical subsidy by providing the DHS-1341A, Parent's Request for Medical Subsidy for An Adopted Child, and refer them to the Adoption and Guardianship Assistance Office (AGAO) in situations where:

- A child was not previously certified for a medical subsidy.
- A child was certified for a medical subsidy, but the family wishes to request certification of additional medical conditions.

**NEW BIRTH
CERTIFICATE
ISSUANCE**

Upon notification of finalization by the family court, MDHHS issues a new certificate of birth. Form DCH-0854, Establish New Michigan Birth Record Following an Adoption, is used by the court for notification to MDHHS.

**NEW SOCIAL
SECURITY NUMBER
(SSN) ISSUANCE**

Upon finalization of the child's adoption, the adoptive family must be referred to the Social Security Administration to apply for a new SSN. The adoptive parents must have a copy of the child's new birth certificate in order to apply for a new SSN. In some instances, Social Security Administration policy may prohibit the issuance of a new SSN, but will change the child's name on the card.